

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. _____ FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/					
2	/					
3	/					
4	/					
5	/					
6	/					
7	/					
8	/					
9	/					
10	/					
11	(1)					
12	(2)					
13	(3)					
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TOTAL IND.						
TOTAL DEP.	18					
TOTAL CLAIMS	19					

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IND	DEP	IND	DEP
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100			
TOTAL IND.			
TOTAL DEP.			
TOTAL CLAIMS			

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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Patent and Trademark Office